

PRINTER RUSH
(PTO ASSISTANCE)

Application : 10/826426

Examiner : Foster

GAU : 3728

From: GM

Location: HDC FMF FDC

Date: 8/24/2005

Tracking #: 6127794

Week Date: 8/18/2005

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>3-7-05</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE: Claims: Original Claim 4 depends upon Claim 4.
Please resolve

Thank you,
GM

[XRUSH] RESPONSE: _____

INITIALS: